

U.S. Department of Justice  
United States Marshals Service

## PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	UNITED STATES MARSHAL	COURT CASE NUMBER
Lily Anne Hopkins	2021 OCT -8 AM 10:33	4:19-cv-5041 452019-CV-05041-
DEFENDANT	SOUTHERN DIST. S/TX	TYPE OF PRO
Bobby Lumpkin, et al		United States Courts Order, Summons
SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN	
AT	Nurse Practitioner Pamela Wagner	
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	
	Connally Unit 899 FM 632 Kennedy, TX 78119	

OCT 22 2021

Nathan Wagner, Clerk of Court

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285
United States Courts 515 Rusk St. Houston, TX 77002	Number of parties to be served in this case
	Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Signature of Attorney other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
<i>[Signature]</i>	<input type="checkbox"/> DEFENDANT	7132505500	10/8/2021

## SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No.	District to Serve No.	Signature of Authorized USMS Deputy or Clerk	Date
	1	71	71	<i>[Signature]</i>	10/12/2021

I hereby certify and return that I  have personally served,  have legal evidence of service,  have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below. I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	Date	Time
	10/12/2021	11:37 <input checked="" type="checkbox"/> am <input type="checkbox"/> pm

Address (complete only different than shown above)	Signature of U.S. Marshal or Deputy
	<i>[Signature]</i> Joseph Castro 10/12/2021

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
8			8		

## REMARKS

- Served via certified mail 10/12/2021  
 tracking is 7019 2280 002 0708 2996  
 - Served via certified mail on 10/12/2021  
 @ 10:43 AM. (See attached proof)



FAQs >

Track Another Package +

**Tracking Number:** 70192280000207082996

Remove X

Your item was picked up at the post office at 10:43 am on October 18, 2021 in KENEDY, TX 78119.

## Delivered, Individual Picked Up at Post Office

October 18, 2021 at 10:43 am  
KENEDY, TX 78119

Get Updates ▾

Feedback

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Text & Email Updates ▾

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Tracking History ▾

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**October 18, 2021, 10:43 am**

Delivered, Individual Picked Up at Post Office  
KENEDY, TX 78119

Your item was picked up at the post office at 10:43 am on October 18, 2021 in KENEDY, TX 78119.

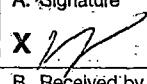
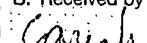
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**October 13, 2021, 12:37 pm**

USPS in possession of item  
HOUSTON, TX 77208

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Product Information ▾

<b>SENDER: COMPLETE THIS SECTION</b>		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Signature </p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) </p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes or delivery address below: <input type="checkbox"/> No</p>	
<p>1. Article Addressed to:</p> <p>TDCJ-Connally Unit Attn: Warden Phonso Rayford's Office 899 FM 632 Kenedy, TX 78119</p> <p></p> <p>9590 9402 5383 9189 6765 04</p>		<p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> <p><input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>2. Article Number: <i>Transfer from service label</i> 7019 2280 0002 0708 2998</p>		<p>Domestic Return Receipt</p>	

PS Form 3811, July 2015 PSN 7530-02-000-9053